

Updated November 6, 2012

Questions and Answers about Pertussis (Whooping Cough) in Schools

How is pertussis spread?

- Pertussis bacteria are spread through droplets produced during coughing or sneezing. These droplets don't travel very far through the air and usually only infect persons within 3 to 6 feet.

How can pertussis be prevented?

- The best way to prevent pertussis is to be vaccinated.
- In addition to routine childhood immunizations, a pertussis vaccine booster shot is now recommended for adolescents and adults. Ask your healthcare provider for more information.

What can I do to prevent the spread of pertussis and other communicable diseases?

- Wash your hands often
- Stay at home if you are ill
- When coughing, cover your mouth with a tissue or cough into your sleeve

When and for how long can a person spread pertussis?

- Persons with pertussis can spread it to others in the first 3 weeks of coughing if not treated with antibiotics. After a person with pertussis has taken antibiotics for 5 days, he or she can no longer spread the disease even though the coughing may continue.
- Although the cough can last longer than 3 weeks, without treatment, a person is no longer contagious after the third week of coughing.

How long should someone with pertussis stay home from school or work?

- Persons with pertussis should stay home from school and other activities until they have finished 5 days of an appropriate antibiotic, unless they have already been coughing for 3 or more weeks.

When should a child be excluded from school?

- If a child's healthcare provider suspects or confirms a diagnosis of pertussis and/or prescribes antibiotic treatment, the child should be excluded for 5 days after an appropriate antibiotic is started.
- If an unvaccinated child has been in close contact with a person with pertussis and is not taking antibiotics to prevent illness, the likelihood of the child getting pertussis disease and transmitting it to others is high. In this case, the child would be excluded from school until the maximum incubation period (21 days) from the last exposure has passed. (http://www.sos.state.ne.us/rules-and-regs/regsearch/Rules/Health_and_Human_Services_System/Title-173/Chapter-3.pdf)

Questions and Answers about Pertussis (Whooping Cough) in Schools (Page 2 of 4)

Who is at risk when a child has been diagnosed with pertussis?

- Pertussis spreads by droplets coughed into the air. In general, persons who are within 3-6 feet of someone with pertussis for a prolonged period of time are considered close contacts and are at risk of getting pertussis. The health department will conduct an investigation to identify and notify others who have been exposed. Persons who live in the same household are considered close contacts and are at risk, even if they have been immunized because immunity to pertussis is not life-long.

My child has been identified as a close contact of a child with pertussis. Does my whole family need to be treated?

- A well person who is taking antibiotics because they are a contact of someone with pertussis does not have pertussis and is not contagious. Other members of the household do not need to take antibiotics to prevent illness if they have not been in close contact with an ill person.

When can a child return to school?

- The child may return to school if the healthcare provider has ruled out pertussis, or the child has completed at least five days of antibiotic treatment.

My child has been vaccinated. Why did he/she get pertussis?

- Persons who have completed some or all of the recommended vaccinations for pertussis may still get pertussis disease, but will generally have a milder illness.
- Outbreaks of pertussis have occurred in schools with very high vaccination rates.
- Immunity from pertussis vaccination is variable, meaning not everyone develops a full immune response from this vaccine. Boosters are recommended because immunity has been shown to wane after 3-5 years.
- You can review your child's vaccination history with your physician to determine if your child is eligible for a booster pertussis vaccination. In outbreak settings, there are some instances where a booster can be given sooner than in the recommended schedule.
- Vaccination is still considered the best way to prevent illness.

Why doesn't the health department recommend the entire school be notified after one case has been reported in the school?

- To notify the entire school would imply that we feel that students in the entire school are at risk. This is not the case.
- Pertussis spreads by droplets coughed into the air. In general, persons who are within 3-6 feet of someone with pertussis for a prolonged period of time are considered close contacts and are at risk of getting pertussis.

Questions and Answers about Pertussis (Whooping Cough) in Schools (Page 3 of 4)

What is the public health response when **one case** of pertussis occurs in a school?

- The Douglas County Health Department follows national and expert guidelines when responding to one or more cases of pertussis in a group setting.
- Staff and children **in the same classroom** who are coughing continuously should be excluded pending physician evaluation.
- Children diagnosed with pertussis may return to the school five days after initiation of antibiotic therapy.
- Individuals **in this classroom** should be observed closely for the development of respiratory symptoms for 21 days following the infected persons last day in class. If an individual attending the class develops respiratory symptoms, his/her physician should be contacted at once for evaluation.
- School-wide notification is not recommended because that would imply a risk for the whole school. The health department will notify all persons and groups who are at risk.

What is the public health response when **more than one case of pertussis** occurs in the same classroom?

- More than one case in a classroom indicates that transmission has likely occurred in that room.
- In this case, it is usually recommended that all children **in the same classroom** take antibiotics to prevent illness (this is called “prophylaxis.”) These children are not ill, and therefore are not contagious, and do not need to be excluded from school.
- It is important that every child covered by the recommendation receives antibiotic prophylaxis. Children who do not receive the recommended prophylaxis may become ill with pertussis and expose other children again. The antibiotic only protects as long as it is being taken (usually 10 days or less, depending on the antibiotic), so this could result in another recommendation for the entire class to receive prophylaxis.
- Household members of the children on antibiotics to prevent illness do not need to take antibiotics.
- Staff and children **in the same room** who are coughing should be excluded pending physician evaluation. Children diagnosed with pertussis may return to the school five days after initiation of antibiotic therapy.
- School-wide notification is not recommended because that would imply a risk for the whole school. The health department will notify all persons and groups who are at risk.

Questions and Answers about Pertussis (Whooping Cough) in Schools (Page 4 of 4)

What is the public health response when an outbreak is occurring in a school?

- The health department may determine a pertussis outbreak is occurring if there is evidence of transmission throughout a school without identifiable exposures.
- The Centers for Disease Control and Prevention's outbreak control guidelines are very general because of the many variations in circumstances in which outbreaks may occur.
- The health department generally responds to pertussis outbreaks in the following way:
 - Consults with infectious disease specialists and State and federal experts on pertussis outbreak control to determine the best course of action in a given situation.
 - Follows guidelines on the prevention and treatment of pertussis from the Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices (ACIP), and the American Academy of Pediatrics.
 - Notifies parents of an outbreak situation.
 - Excludes students with cough illness pending physician evaluation.
 - Recommends observation of students for symptoms
 - Recommends evaluation of pertussis vaccination status.
 - Closely monitors the school to detect new cases quickly.
 - Conducts contact investigations to identify exposed individuals who need antibiotic prophylaxis and ill persons who may need to be evaluated for pertussis.
 - Emphasizes the importance of respiratory etiquette and other infection control measures.

Why doesn't the health department recommend closing the school?

- There is no evidence that school closure prevents pertussis disease transmission and no guarantee that students will not congregate in other settings.

Why does the health department know about my child's illness?

- State statute Title 173 requires physicians/labs to report certain conditions to authorized health departments for the purpose of tracking diseases and implementing disease control measures to protect public health.
- The health department is required to maintain confidentiality. All health department employees who work with personal health information sign a patient confidentiality agreement.
- The HIPAA Privacy Rule expressly permits personal health information (PHI) to be shared for specified public health purposes. For example, covered entities may disclose PHI, without individual authorization, to a public health authority legally authorized to collect or receive the information for the purpose of preventing or controlling diseases, injury, or disability. Further, the Privacy Rule permits covered entities to make disclosures that are required by other laws, including laws that require disclosures for public health purposes. [CDC, 2003, <http://www.cdc.gov/mmwr/preview/mmwrhtml/m2e411a1.htm>]